

APPLICATION FOR EMPLOYMENT

The City of Cleveland is an Equal Opportunity Employer and is committed to a moral, ethical and legal responsibility to insure equitable employment practices irregardless of an individual's race, color, religion, national origin, age, gender, disability or political affiliation. It is the policy of the City of Cleveland to insure that all personally identifiable information is held in strictest confidence, property safeguarded and the use of such information is limited to valid business, regulatory or legal requirements.

PLEASE NOTE: This application is a very important part of the examination process. All requested information must be furnished. Please be aware that the information you provide will be used in the job screening process. Therefore, it is important that you be as specific as possible in your description of past and present experiences, training and education. Answer all questions fully and accurately. If additional space is needed please use a blank sheet and attach it to the application form. If an item does not apply to you, or if there is no information to be given, please write in the letters "NA" for not applicable. All job applications are a matter of public record.

POSITION APPLIED FOR: _____ FULL TIME _____ PART TIME _____

SALARY REQUIRED _____ PER _____ DATE _____

DATE AVAILABLE FOR EMPLOYMENT _____

HAVE YOU EVER BEEN EMPLOYED BY THE CITY? YES _____ NO _____

PERSONAL DATA									
ENTER YOUR SOCIAL SECURITY NUMBER HERE					PERSONNEL DEPARTMENT ONLY				
<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div>					INTERVIEW DATE _____				
LAST NAME		FIRST			MIDDLE			HIRE DATE _____	
APARTMENT NO.		STREET ADDRESS							
CITY		STATE		ZIP CODE		COUNTY		POSITION _____ Phone where you can be reached during the day →	
AREA CODE		PHONE							
ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS <input type="checkbox"/> YES <input type="checkbox"/> NO									
EDUCATION--SPECIFIC COLLEGE HOURS MUST BE LISTED IN THIS SECTION									
Circle highest grade completed		High School Graduate or Equivalent		Vocational School Attended		No. of Months		Area of Study	
1 2 3 4 5 6 7 8 9 10 11 12		<input type="checkbox"/> YES <input type="checkbox"/> NO							
NAME AND LOCATION OF COLLEGES OR UNIVERSITIES ATTENDED		CREDIT RECEIVED		FIELD OF STUDY OR AREA OF CONCENTRATION				TYPE OF DEGREE OBTAINED	DATE OF DEGREE OBTAINED
		Quarter Hours	Semester Hours	Major	Hours	Minor	Hours		
HIGH SCHOOL									
COLLEGE OR UNIVERSITY									
GRADUATE SCHOOL									

DO YOU HOLD A VALID TENNESSEE DRIVER'S LICENSE? ☐ YES ☐ NO

OTHER PERTINENT DATA

PLEASE CHECK AREAS IN WHICH YOU HAVE HAD EXPERIENCE OR TRAINING

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> TYPING SPEED _____ WPM | <input type="checkbox"/> KEY PUNCH | <input type="checkbox"/> ADMINSTRATIVE | <input type="checkbox"/> CUSTODIAN |
| <input type="checkbox"/> SHORTHAND _____ WPM | <input type="checkbox"/> WORD PROCESSING | <input type="checkbox"/> LIGHT EQUIPMENT | <input type="checkbox"/> AUTO MECHANIC |
| <input type="checkbox"/> DICTATING MACHINE | <input type="checkbox"/> MULTIGRAPH | <input type="checkbox"/> HEAVY EQUIPMENT | <input type="checkbox"/> CARPENTRY |
| <input type="checkbox"/> BOOKKEEPING | <input type="checkbox"/> PBX OPERATOR | <input type="checkbox"/> SUPERVISORY | <input type="checkbox"/> OTHER _____ |
| <input type="checkbox"/> ACCOUNTING | <input type="checkbox"/> RECEPTIONIST | <input type="checkbox"/> MACHINIST | |

Describe your work history below beginning with your current or most recent job. Include military and/or volunteer experience. If you worked for the same employer but at various times held different jobs, describe each separately. Describe in DETAIL the SPECIFIC DUTIES beginning with your primary duties (attach additional sheets if necessary). A resume may be attached only as additional information. If duties varied widely in one job give percentages of time for each duty. Indicate the number and types of employees under your SUPERVISION. (Emphasize work you feel relates to the job for which you are applying.) Failure to give complete and detailed information regarding each job held may result in your disqualification.

DETAIL OF DUTIES

DETAIL OF DUTIES

[illegible]

List professional, trade, business or civic activities and offices held.

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:

Describe any job-related training received in the United States Military.

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

State any additional information you feel may be helpful to us in considering your application.

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner the activities involved in the job or occupation for which you have applied? A description of the activities involved in such a job or occupation is attached.

☐ YES

☐ NO

REFERENCES: List three persons who are not related to you and who would have knowledge of your qualifications for the position(s) for which you are applying, such as former co-workers, teachers, etc. Do not repeat names of supervisors listed under Experience.

NAME	ADDRESS	TELEPHONE NUMBER

Have you ever been convicted, pled guilty or pled "No contest" to any criminal offense against the law, YES NO
or are you now under charges for any offense against the law? ☐ ☐
(You may omit traffic violations for which you paid a fine of \$30.00 or less.)

While in the military service were you ever convicted by a general court-martial? ☐ ☐

If yes, please explain: Show for each offense: (1) date, (2) charge, (3) Place, (4) Court, and (5) Action Taken, NOTE! A conviction does not automatically mean you cannot be appointed. What you were convicted of, and how long ago, are important. Give all the facts so that a decision can be made.

AUTHORIZATIONS

I authorize investigation of all statements contained in this application, and it is understood and agreed that any misrepresentation by me in this application will be sufficient cause for cancellation of the application and/or for separation from City service if I have been employed.

I hereby authorize any person or organization whose name I have given as a reference, or by whom I have been previously employed, to furnish the City of Cleveland any information they may have concerning me, and I hereby release all such persons and organizations from any claims for damages.

I hereby authorize investigation of my criminal conviction record.

I further authorize any physician who has examined or treated me for Worker's Compensation claims to give you a complete record and report of findings and opinions.

I agree, if employed, to abide by all the rules, regulations and ordinances of the City of Cleveland.

I understand that the completion of this Application for Employment does not constitute an offer of employment.

I further understand that if I am employed by the City of Cleveland this Application for Employment will not constitute a contract of employment.

I certify that the information I have given is true and correct to the best of my knowledge.

SIGN HERE

Signature: _____ Date _____
(Please sign full name)

FOR ADMINISTRATIVE USE ONLY

DATE REVIEWED _____ SUPERVISOR _____

COMMENTS: _____

_____ Interviewed by: _____

(Initials)

DATE INTERVIEWED _____

COMMENTS: _____

_____ Interviewed by: _____

DATE TO START WORK _____ DEPARTMENT _____ DEPT. HEAD _____

JOB TITLE _____ BEGINNING SALARY _____

REGULAR HOURS OF WORK _____ TO _____ FULL TIME _____ PART TIME _____ TEMP. _____ OTHER _____

NAME AND RELATIONSHIP OF PERSON TO NOTIFY IN CASE OF AN EMERGENCY

NAME _____ RELATIONSHIP _____

ADDRESS _____ PHONE NO. _____